

CLAIMS

1. A method for generating a patient record that is compliant with insurance guidelines, the insurance guidelines including a plurality of service levels associated with patient care wherein each of the different service levels affords a health care

5 provider a different amount of reimbursement, the method comprising the steps of:

(A) receiving answers to a patient intake questionnaire;

(B) determining a service level applicable to a patient encounter by applying objective rules to the questionnaire answers, wherein the objective rules identify a service level that maximizes the amount of reimbursement associated with the patient

10 encounter;

(C) applying the determined service to a medical treatment template in order to identify elements of service to be provided to the patient during the encounter;

(D) providing the identified elements of service to the patient during the encounter;

(E) after the encounter, documenting the identified elements of service provided to

15 the patient; and

(F) forming the compliant patient record by inputting reimbursement information documented in step (E) into a computer system, wherein the reimbursement information corresponding to the patient encounter is only inputted into the computer system after at least steps (A) to (C) have been performed.

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2. The method of claim 1, wherein the insurance guidelines are Medicare guidelines.

3. A method for generating a compliant patient record that is compliant with insurance guidelines, the method comprising:

providing a medical transcription system that includes a plurality of fields that may be filled with either a default value or a non-default value;

5 providing a template for a doctor to view the default values for each one of said plurality of fields, the default values for each one of said plurality of fields may vary based on an exam level;

dictating the non-default values for each one of said plurality of fields where the default value is inappropriate;

10 inputting the non-default values, and allowing the medical transcription system to input the default values, in the medical transcription system; and generating the compliant patient record.

4. The medical of claim 3, wherein the doctor dictates the non-default values.

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5. The method of claim 3, wherein a medical transcriptionist inputs the non-default values.

6. The method of claim 3, wherein the medical transcription system generates the
20 compliant patient record.

7. The method of claim 3, wherein the template includes a medical treatment template.

8. The method of claim 3, wherein the insurance guidelines include Medicare guidelines.

9. A method for generating a compliant patient record that is compliant with
5 insurance guidelines using a medical transcription system that includes a plurality of fields that may be filled with either a default value or a non-default value, the method comprising:

providing a template for a doctor to view the default values for each one of said plurality of fields, the default values for each one of said plurality of fields may vary
10 based on an exam level;

dictating the non-default values for each one of said plurality of fields where the default value is inappropriate.

10. The medical of claim 9, wherein the doctor dictates the non-default values.

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11. The method of claim 9, wherein the template includes a medical treatment template.

12. The method of claim 9, wherein the insurance guidelines include Medicare
20 guidelines.

13. A method for generating a compliant patient record that is compliant with insurance guidelines, in which a doctor relies on a template to view the default values for each one of a plurality of fields, the default values for each one of said plurality of

fields may vary based on an exam level, the doctor dictating the non-default values for each one of said plurality of fields where the default value is inappropriate, the method comprising:

providing a medical transcription system that includes the plurality of fields

- 5 that may be filled with either a default value or a non-default value, the default values for each one of said plurality of fields may vary based on an exam level;

inputting the non-default values, and allowing the medical transcription system to input the default values, in the medical transcription system; and

generating the compliant patient record.

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14. The method of claim 13, wherein a medical transcriptionist inputs the non-default values.

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15. The method of claim 13, wherein the medical transcription system generates the compliant patient record.

16. The method of claim 13, wherein the template includes a medical treatment template.

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17. The method of claim 13, wherein the insurance guidelines include Medicare guidelines.

18. An apparatus for generating a patient record that is compliant with insurance guidelines, the insurance guidelines including a plurality of service levels associated

with patient care wherein each of the different service levels affords a health care provider a different amount of reimbursement, the apparatus comprising:

means for receiving answers to a patient intake questionnaire;

means for determining a service level applicable to a patient encounter by

- 5 applying objective rules to the questionnaire answers, wherein the objective rules identify a service level that maximizes the amount of reimbursement associated with the patient encounter;

means for applying the determined service to a medical treatment template in order to identify elements of service to be provided to the patient during the encounter;

- 10 means for providing the identified elements of service to the patient during the encounter;

means for documenting the identified elements of service provided to the patient following the encounter; and

- means for forming the compliant patient record by inputting reimbursement information documented by said means for documenting into a computer system, wherein the reimbursement information corresponding to the patient encounter is only inputted into the computer system after at least the means for receiving answers, means for determining a service level applicable, and the means for applying the determined service to a medical treatment template have completed their respective functions.

19. An apparatus for generating a compliant patient record that is compliant with insurance guidelines, the apparatus comprising:

means for providing a medical transcription system that includes a plurality of fields that may be filled with either a default value or a non-default value;

means for providing a template for a doctor to view the default values for each one of said plurality of fields, the default values for each one of said plurality of fields

5 may vary based on an exam level;

means for dictating the non-default values for each one of said plurality of fields where the default value is inappropriate;

means for inputting the non-default values, and allowing the medical transcription system to input the default values, in the medical transcription system;

10 and

means for generating the compliant patient record.

20. A method for generating a compliant patient record that is compliant with insurance guidelines, the method comprising:

15 filling in a plurality of fields of a medical transcription system that may be filled with either a default value or a non-default value;

a doctor viewing the default values for each one of said plurality of fields in a template, the default values for each one of said plurality of fields may vary based on an exam level, wherein, using the template, a doctor can dictate the non-default values
20 for each one of said plurality of fields where the default value is inappropriate;

inputting the non-default values using a medical transcription system including a computer;

allowing the medical transcription system to input the default values to be stored by the medical transcription system; and

generating the compliant patient record using the medical transcription system.

21. The method of claim 20, wherein the doctor dictates the non-default values.

5 22. The method of claim 20, wherein a medical transcriptionist inputs the non-default values.

23. The methods of claim 20, wherein the template includes a medical treatment template.

10 24. The method of claim 20, wherein the insurance guidelines include Medicare guidelines.

15 25. A business method for generating a compliant patient record that is compliant with insurance guidelines, the method comprising:

filling in a plurality of fields of a medical transcription system that may be filled with either a default value or a non-default value;

20 a doctor viewing the default values for each one of said plurality of fields in a template, the default values for each one of said plurality of fields may vary based on an exam level, wherein, using the template, a doctor can dictate the non-default values for each one of said plurality of fields where the default value is inappropriate;

inputting the non-default values using a medical transcription system including a computer;

allowing the medical transcription system to input the default values to be stored by the medical transcription system; and generating the compliant patient record using the medical transcription system.

5 26. A method for generating a letter using a patient record that is compliant with insurance guidelines, the letter includes fields, the method comprising:

filling in a plurality of fields of a medical transcription system that may be filled with either a default value or a non-default value;

a doctor viewing the default values for each one of said plurality of fields in a template, the default values for each one of said plurality of fields may vary based on an exam level, wherein, using the template, a doctor can dictate the non-default values for each one of said plurality of fields where the default value is inappropriate;

inputting the non-default values using a medical transcription system including a computer;

15 allowing the medical transcription system to input the default values to be stored by the medical transcription system;

generating the compliant patient record using the medical transcription system; applying the input default or non-default values into the fields of the letter; and generating the letter including the default fields.

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27. A business method for generating a patient record that is compliant with insurance guidelines, the insurance guidelines including a plurality of service levels associated with patient care wherein each of the different service levels affords a

health care provider a different amount of reimbursement, the method comprising the steps of:

- (A) receiving answers to a patient intake questionnaire;
- (B) determining a service level applicable to a patient encounter by applying objective rules to the questionnaire answers, wherein the objective rules identify a service level that maximizes the amount of reimbursement associated with the patient encounter;
- (C) applying the determined service to a medical treatment template in order to identify elements of service to be provided to the patient during the encounter;
- (D) providing the identified elements of service to the patient during the encounter;
- (E) after the encounter, documenting the identified elements of service provided to the patient; and
- (F) forming the compliant patient record by inputting reimbursement information documented in step (E) into a computer system, wherein the reimbursement information corresponding to the patient encounter is only inputted into the computer system after at least steps (A) to (C) have been performed.

28. An exam level portion of a medical treatment template, comprising:
a plurality of portions that a doctor can use to dictate a Medicare-compliant
medical record, certain ones of said portions include default values that represent a
common value for said particular portion, wherein text relating to certain ones of said
portions vary depending upon a level of examination.

29. The exam level portion of a medical treatment template of claim 28, wherein the text in a plurality of portions that vary depending upon the level of examination are all included within a single template.

5 30. The exam level portion of a medical treatment template of claim 29, wherein the text relating to one particular varying levels of examination is differentiated from text relating to another particular varying levels of examination.

10 31. The exam level portion of a medical treatment template of claim 30, wherein the text relating to the different varying levels of examination is differentiated using one of the group of highlighting, text coloring, text shading, and highlighting coloring.

15 32. The exam level portion of a medical treatment template of claim 28, wherein the text in a plurality of portions that vary depending upon the level of examination is each included within one of a plurality of templates.

33. The exam level portion of a medical treatment template of claim 32, wherein the text relating to one particular varying levels of examination is differentiated from text relating to another particular varying levels of examination.